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FAX TRANSMISSION**DATE:** February 28, 2007**PTO IDENTIFIER:** Application Number 10/646,070-Conf. #8796
Patent Number**Inventor:** Michael W. Graham et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** PATTON BOGGS LLP

Therese M. Finan

PHONE: (703) 744-8069**Attorney Dkt. #:** 025122.0101N1US**PAGES (Including Cover Sheet):** 25

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- Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
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PTO/SB/87 (09-04)

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Application No. (If known): 10/646,070

Attorney Docket No.: 025122.0101N1US

Certificate of Transmission under 37 CFR 1.8

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on February 28, 2007
Date

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42,533
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Telephone Number

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Certificate of Transmission (1 page)

Amendment Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

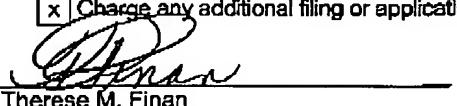
Fee Transmittal (1 page)

Amendment (19 pages)

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AMENDMENT TRANSMITTAL LETTER				Docket No. 025122.0101N1US	
Application No. 10/848,070-Conf. #8796	Filing Date August 22, 2003	Examiner B. A. Whiteman		Art Unit 1635	
Applicant(s): Michael W. Graham et al.					
Invention: CONTROL OF A GENE EXPRESSION					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	40	- 106 =	0	x	
Independent Claims	3	- 5 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,020.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-2228 in the amount of \$. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 50-2228 as described below. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Dated: February 28, 2007					
Therese M. Finan Attorney/Agent Reg. No.: 42,533					
PATTON BOGGS LLP 8484 Westpark Drive, 9th Floor McLean, Virginia 22102 (703) 744-8069					

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PTO/SB/17 (07-06)

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Effective on 12/08/2004. Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
		Application Number	10/646,070-Conf. #8796
		Filing Date	August 22, 2003
		First Named Inventor	Michael W. Graham
		Examiner Name	B. A. Whiteman
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	1635
TOTAL AMOUNT OF PAYMENT	(\$) 1,020.00	Attorney Docket No.	025122.0101N1US

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Nonc	<input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account		Deposit Account Number: 50-2228		Deposit Account Name: _____ Patton Boggs LLP
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
40	- 20 = 0	x	=	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

3 - 3 = 0 x =

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/50 (round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Signature	<i>Therese M. Flanagan</i>	42,533	(703) 744-8089
Name (Print/Type)	Therese M. Flanagan	Date	February 28, 2007

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